

## CARE AGE OF BROOKFIELD

1755 N BARKER RD

BROOKFIELD 53045

Phone: (262) 821-3939

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 110

Total Licensed Bed Capacity (12/31/04): 110

Number of Residents on 12/31/04: 109

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 107

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		40.4	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		43.1	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.8	Under 65	1.8	More Than 4 Years		16.5	
Day Services	No	Mental Illness (Org./Psy)	39.4	65 - 74	8.3			-----	
Respite Care	Yes	Mental Illness (Other)	5.5	75 - 84	26.6			100.0	
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	59.6	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.9	95 & Over	3.7	Full-Time Equivalent			
Congregate Meals	No	Cancer	2.8		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	6.4		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	3.7	65 & Over	98.2	-----			
Transportation	No	Cerebrovascular	11.9		-----	RNs		13.4	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		12.8	
Other Services	No	Respiratory	8.3	-----	-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	19.3	Male	23.9	Aides, & Orderlies			
Mentally Ill	No	-----	-----	Female	76.1				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

## Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	1	9.1	322	2	5.1	154	0	0.0	0	3	5.1	179	0	0.0	0	0	0.0	0	6	5.5
Skilled Care	10	90.9	328	36	92.3	132	0	0.0	0	50	84.7	163	0	0.0	0	0	0.0	0	96	88.1
Intermediate	---	---	---	1	2.6	110	0	0.0	0	6	10.2	158	0	0.0	0	0	0.0	0	7	6.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	11	100.0		39	100.0		0	0.0		59	100.0		0	0.0		0	0.0		109	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	4.6	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	0.0	68.8	31.2	109
Other Nursing Homes	4.6	Dressing	6.4	67.0	26.6	109
Acute Care Hospitals	87.4	Transferring	20.2	55.0	24.8	109
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	12.8	60.6	26.6	109
Rehabilitation Hospitals	0.0	Eating	58.7	22.9	18.3	109
Other Locations	3.4	*****				
Total Number of Admissions	175	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	14.7		Receiving Respiratory Care	15.6
Private Home/No Home Health	21.8	Occ/Freq. Incontinent of Bladder	56.9		Receiving Tracheostomy Care	1.8
Private Home/With Home Health	11.2	Occ/Freq. Incontinent of Bowel	44.0		Receiving Suctioning	1.8
Other Nursing Homes	2.9				Receiving Ostomy Care	0.0
Acute Care Hospitals	29.4	Mobility			Receiving Tube Feeding	4.6
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	6.4		Receiving Mechanically Altered Diets	39.4
Rehabilitation Hospitals	0.0					
Other Locations	13.5	Skin Care			Other Resident Characteristics	
Deaths	21.2	With Pressure Sores	5.5		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	0.0		Medications	
(Including Deaths)	170				Receiving Psychoactive Drugs	59.6

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.3	86.4	1.13	86.5	1.12	87.3	1.11	88.8	1.10
Current Residents from In-County	78.9	85.0	0.93	87.0	0.91	85.8	0.92	77.4	1.02
Admissions from In-County, Still Residing	21.1	18.1	1.17	18.9	1.12	20.1	1.05	19.4	1.09
Admissions/Average Daily Census	163.6	199.9	0.82	188.2	0.87	173.5	0.94	146.5	1.12
Discharges/Average Daily Census	158.9	201.1	0.79	190.4	0.83	174.4	0.91	148.0	1.07
Discharges To Private Residence/Average Daily Census	52.3	83.1	0.63	77.5	0.68	70.3	0.74	66.9	0.78
Residents Receiving Skilled Care	93.6	95.8	0.98	95.9	0.98	95.8	0.98	89.9	1.04
Residents Aged 65 and Older	98.2	84.4	1.16	90.5	1.08	90.7	1.08	87.9	1.12
Title 19 (Medicaid) Funded Residents	35.8	61.2	0.58	56.3	0.64	56.7	0.63	66.1	0.54
Private Pay Funded Residents	54.1	13.7	3.94	22.2	2.44	23.3	2.32	20.6	2.63
Developmentally Disabled Residents	1.8	1.2	1.55	1.1	1.65	0.9	2.11	6.0	0.30
Mentally Ill Residents	45.0	30.0	1.50	29.0	1.55	32.5	1.38	33.6	1.34
General Medical Service Residents	19.3	23.2	0.83	25.4	0.76	24.0	0.80	21.1	0.91
Impaired ADL (Mean)	53.2	52.9	1.01	52.6	1.01	51.7	1.03	49.4	1.08
Psychological Problems	59.6	51.7	1.15	55.4	1.08	56.2	1.06	57.7	1.03
Nursing Care Required (Mean)	8.6	8.4	1.02	7.7	1.12	7.7	1.11	7.4	1.16